Form No. DMB 234 (Rev. 1/96) AUTHORITY: Act 431 of 1984 COMPLETION: Required PENALTY: Contract will not be executed unless form is filed

STATE OF MICHIGAN DEPARTMENT OF MANAGEMENT AND BUDGET ACQUISITION SERVICES P.O. BOX 30026, LANSING, MI 48909 OR

April 30, 2002

530 W. ALLEGAN, LANSING, MI 48933

CHANGE NOTICE NO. 5 TO

CONTRACT NO. ___071B1001038

between

THE STATE OF MICHIGAN

and

| WAAG. | |
|---|----------------------------|
| NAME & ADDRESS OF VENDOR | TELEPHONE Gregory H. Moses |
| | (313) 393-4570 |
| OmniCare Health Plan | VENDOR NUMBER/MAIL CODE |
| Gregory H. Moses, Jr., President & CEO | (2) 38-2031377 (007) |
| 1155 Brewery Park Blvd., Suite 250 | BUYER (517)-241-1647 |
| Detroit, MI 48207 | Irene Penà |
| Contract Administrator: Rick Murdock | |
| Comprehensive Health Care Program (CHCP) Services for Medicaid Beneficiaries in Selected Michigan | |
| Counties Department of Community Health | |
| CONTRACT PERIOD: From: October 1, 200 | 00 To: October 1, 2004 |
| TERMS | SHIPMENT |
| N/A | N/A |
| F.O.B. | SHIPPED FROM |
| N/A | N/A |
| MINIMUM DELIVERY REQUIREMENTS | |
| *Plus three (3) each possible one-year extensions | |

NATURE OF CHANGE (S):

Effective immediately, the attached list of changes are hereby incorporated into this contract per agency request from Rick Murdock.

TOTAL ESTIMATED CONTRACT VALUE REMAINS:

The exact dollar value of this contract is unknown; the contractor will be paid based upon actual beneficiary enrollment at the rates (prices) specified in Attachment A to the original Notice of Contract.

Proposed Contract Change Notice Comprehensive Health Care Program For Contracts Awarded under ITB 171I0000251

1. Proposed Contract Change No. 1:

Amend Title Page of Contract, under "Contract Period" by deleting "October 1, 2002" and inserting "October 1, 2004."

Amend Section I-A (Purpose) by deleting the last two sentences and inserting with following:

The term of the Contract shall be effective October 1, 2000 and continue until
October 1, 2004. The Contract may be extended for no more than one (1) year
extension after September 30, 2004.

Amend Section I-D (Term of Contract) by deleting the first two sentences and inserting the following:

The term of the Contract shall be effective October 1, 2000 and continue until October 1, 2004. The Contract may be extended for no more than one (1) year extension after September 30, 2004.

Rationale: This is the first possible contract extension permitted under the current agreement. The State of Michigan will not be initiating a competitive re-bid for the Comprehensive Health Care Program over the next several years. Therefore, extending the contract for additional two years is requested. The original contract anticipated a possible five year contract if all extensions were used. With implementation of the Contract Change Notice, the Contract will be a total of four years and defers the decision on re-bidding until FY 04/05, unless the final potential extension is implemented at that time.

2. Proposed Contract Change No. 2:

Amend Section I-C, (Contract Administrator) by deleting the current listed "Contract Administrator" and replacing with the following Contract Administrator:

Cheryl Bupp
Manager, Plan Management Section
Comprehensive Health Plan Division
Michigan Department of Community Health
P.O. Box 30479
Lansing, Michigan 48909

Rationale: The change reflects the responsibility of the Ms. Bupp for the day-to-day management of the Contract.

3. Proposed Contract Change No. 3:

Amend Section II-W, (Contract Remedies), by inserting the following at the end of the section: "The DCH will not apply any Contract Remedy to two Performance Standards listed in Attachment D that address the issue of Customer Services: (Provider Choice and Provider Selection)."

Rationale: The change is to assure Contracting Health Plans that the Performance Standard (Attachment D of the Contract) based "solely on consumer surveys" will not be subject to application of any future Contract Remedy.